PROVIDER ISSUES IN CABINET FOR HEALTH AND FAMILY SERVICES ADMINISTRATIVE HEARINGS

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Michael Head
Director and Chief Hearing Officer
Division of Administrative Hearings
Cabinet for Health and Family Services
275 East Main Street, HS 1E-A
Frankfort, Kentucky 40621-0001
(502) 564-6621
(502) 564-8975 - FAX

CHFS ADMINISTRATIVE HEARINGS: OUR GOALS

- > Fair
- > Expert
- > Timely
- > Responsive

CHFS ADMINISTRATIVE HEARINGS

- > F&C AHB: Eligibility Hearings
 - ✓ 2012: 1957 case assignments
 - √ 2012: 593 Medicaid eligibility case assignments
- > HS AHB: Service Hearings
 - ✓ 2012: 1472 case assignments
 - √ 2012: 696 Medicaid service case assignments;
 - 485 MCO cases;
 - 211 FFS cases;
 - 59 Provider Repayment cases; and
 - 7 Provider Termination cases

HEARINGS and TRIALS

> Legislative Branch: Enact Law

> Judicial Branch: Adjudicate Law

Executive Branch: Enforce Law Promugate Law and Adjudicate Law

DUE PROCESS IN ADMINISTRATIVE HEARINGS

> Constitutional Protections

> KRS Chapter 13B

DUE PROCESS IN ADMINISTRATIVE HEARINGS

- > Timely and Adequate Notice
- > Meaningful Opportunity to be Heard
- > Impartial Decision Maker

Hearings Basics

- 1. Service Denial: Cabinet or MCO sends Adverse XN Letter
- 2. Patient Request for a Grievance Review
 - √ w/i 30 days event: 907 KAR 17:005 Sec. 4(2)
 - ✓ Grievance Process is now Mandatory: 907 KAR 17:005 Sec. 5(1)
- MCO Grievance Procedure
 - √ 30 days for decision: 907 KAR 17:005 Sec. 4(2)(b)
 - Expedited decision if standard time would jeopardize patient's life, health, or ability to achieve maximum functioning: 907 KAR 17:005 Sec. 4(14)

Hearings Basics

- 4. Adverse XN Letter
 - ✓ Must provide law and facts in sufficient detail to allow adequate preparation: 907 KAR 17:005 Sec. 4(20)
- 5. Patient Request for a Hearing
 - √ w/i 45 days in MCO cases: 907 KAR 17:005 Sec 5(3)(b)
 - √ w/i 30 days in FFS cases: 907 KAR 1:563 Sec 4(2)
- 6. Hearing before AHO
 - √ w/i 30 days of Req for Hrg: 907 KAR 1:563 Sec 6(2)

Hearings Basics

- 7. Hearing Officer's Recommended Order
 - √ w/i 30 days of Hearing: 907 KAR 1:563 Sec. 6(2)
- 8. Exceptions to Recommended Order/Request for Cabinet Level Review
 - √ w/i 15 days of Rec Order: 907 KAR 1:563 Sec. 6(2)
- 9. Review by Secretary/Final Order
 - √ w/i 90 days of Req. for Hrg: 907 KAR 1:563 Sec. 9(3)
- 10. Appeal to Circuit Court and beyond
 - √ w/i 30 days of Final Order: 907 KAR 1:563 Sec. 10(2)

Providers as Authorized Representatives

- Provider must have member's "written consent"
 - ✓ 907 KAR 17:010 Sec. 4(4)(a)
- > For the "specific action" being appealed
 - ✓ 907 KAR 17:010 Sec. 4(4)(a)
- Consent form must be signed and dated by member "no earlier than date of MCO action"
 - > 907 KAR 17:010 Sec. 4(4)(b)

Prior Authorization

- Required for all services except "physical or behavioral emergency services": See 907 KAR 17:015 Sec. 2(12)
 - ✓ Must be "medically necessary"
 - ✓ Must be authorized after provided
 - ✓ Must be a covered service
- See also "Prudent layperson standard": "acute symptoms of sufficient severity such that w/o immediate medical attention the person (or unborn child) could reasonably expect serious jeopardy to health, serious impairment to bodily function, or serious dysfunction of organs:
 - ✓ 907 KAR 3:130 Sec. 1(4).
- Note: if provider intends to be an authorized representative when an emergency service is denied, the authorization must be signed after the MCO's denial

MEDICAL NECESSITY

- > CHFS must ensure member's <u>right to contest a denial</u>: 907 KAR 3:130 Sec. 2(2)
- Determination of what is a covered benefit or medically necessary must be based on <u>individualized assessment</u> <u>of member's medical needs</u>: 907 KAR 3:130 Sec. 2(1)(a)
- CHFS has "final authority to determine <u>clinical</u> <u>appropriateness</u> AND <u>medical necessity</u>": 907 KAR 3:130 Sec. 2(2)

MEDICAL NECESSITY

- > "medical necessity determination": 907 KAR 3:130 Sec. 2(1)
 - ✓ Reasonable and required to <u>diagnose</u>, treat, or prevent disease, illness, injury, or disability
 - ✓ Appropriate service in <u>amount</u>, <u>scope</u>, <u>and duration</u> based on generally accepted standards of practice
 - ✓ Not for convenience or cosmetic reasons
 - ✓ In the most appropriate location
 - ✓ Or must be a needed emergency service under "prudent layperson standard"
- "clinical appropriateness":
 - ✓ Interqual standards: 907 KAR 3:130 Sec. 1(1)
- > Must also consider "program criteria"

LRC Website for State Law

http://www.lrc.ky.gov/law.htm

This website provides access to all of Kentucky's statutes and regulations searchable by Chapter, Title, or keyword

The End